

EPA United States Environmental Protection Agency Washington, DC 20460 Work Assignment						Work Assignment Number 4-52				
						<input type="checkbox"/> Other <input type="checkbox"/> Amendment Number:				
Contract Number EP-D-14-032			Contract Period 09/16/2014 To 09/15/2019 Base Option Period Number 4			Title of Work Assignment/SF Site Name Alt Reduced form Benefits				
Contractor INDUSTRIAL ECONOMICS, INCORPORATED					Specify Section and paragraph of Contract SOW 1, 3					
Purpose: <input checked="" type="checkbox"/> Work Assignment <input type="checkbox"/> Work Assignment Close-Out <input type="checkbox"/> Work Assignment Amendment <input type="checkbox"/> Incremental Funding <input type="checkbox"/> Work Plan Approval						Period of Performance From 09/16/2018 To 09/15/2019				
Comments: THE WORK ASSIGNMENT INCLUDES 100 HOURS FOR PREPARATION OF THE WORKPLAN/COST ESTIMATE AND TO BEGIN THE WORK ASSIGNMENT. THE CONTRACTOR SHALL PROPOSE THE HOURS NECESSARY TO COMPLETE ALL TASKS. NO PREVIOUSLY PERFORMED WORK SHALL BE DUPLICATED. SEE ATTACHED SOW.										
<input type="checkbox"/> Superfund Accounting and Appropriations Data <input checked="" type="checkbox"/> Non-Superfund										
SFO <input type="checkbox"/> Note: To report additional accounting and appropriations date use EPA Form 1900-69A. (Max 2)										
Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)	(Cents)	Site/Project (Max 8)	Cost Org/Code
1										
2										
3										
4										
5										
Authorized Work Assignment Ceiling										
Contract Period: Cost/Fee: LOE: 09/16/2014 To 09/15/2019										
This Action: 										
Total:										
Work Plan / Cost Estimate Approvals										
Contractor WP Dated: Cost/Fee LOE:										
Cumulative Approved: Cost/Fee LOE:										
Work Assignment Manager Name Elizabeth Chan <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: 919-541-3771 FAX Number:			
Project Officer Name Carolyn Blake <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: 919-541-5256 FAX Number:			
Other Agency Official Name <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: FAX Number:			
Contracting Official Name Natalia Fisher-Jackson <div style="display: flex; justify-content: space-between;"> <div> <i>Natalia Fisher Jackson</i> _____ (Signature) </div> <div> 9/12/2018 _____ (Date) </div> </div>							Branch/Mail Code: Phone Number: 919-541-3564 FAX Number:			